

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

MARINETTE MARINE CORPORATION PAC MMCPAC

ADDRESS (number and street)

1600 ELY ST

Check if different  
than previously  
reported. (ACC)

MARINETTE

WI

54143

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00459453

3. IS THIS  
REPORTNEW  
(N)**OR**AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report(Q1)July 15  
Quarterly Report(Q2)October 15  
Quarterly Report(Q3)January 31  
Quarterly Report(YE)July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the  
State of

5. Covering Period

11

23

2010

through

12

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Ms Shanna Lee Zahn

Signature of Treasurer

Electronically Filed by Ms Shanna Lee Zahn

Date

06

09

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

MARINETTE MARINE CORPORATION PAC MMCPAC

Report Covering the Period:

From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	5609.97
(b) Cash on Hand at Beginning of Reporting Period .....	3976.62	
(c) Total Receipts (from Line 19) .....	2501.98	21068.63
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	6478.60	26678.60
7. Total Disbursements (from Line 31) .....	0.00	20200.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	6478.60	6478.60
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

MARINETTE MARINE CORPORATION PAC MMCPAC

Report Covering the Period:

From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	2200.57	12558.36
(i) Itemized (use Schedule A) .....	301.41	8510.27
(ii) Unitemized .....	2501.98	21068.63
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	2501.98	21068.63
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	2501.98	21068.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2501.98	21068.63

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	18700.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	0.00	1500.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	0.00	20200.00	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	20200.00	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	2501.98	21068.63
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2501.98	21068.63
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 18

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

MARINETTE MARINE CORPORATION PAC MMCPAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. TODD S. ANDERSON

Mailing Address 1188 SWAN ROAD

City

DEPERE

State

WI

Zip Code

54115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

MANAGER COMMODITIES

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4727

Amount of Each Receipt this Period

60.00

Contribution through payr-  
oll deduction -biweekly**B.**

Full Name (Last, First, Middle Initial)

JAMES BRISKEY

Mailing Address N3724 CLEVELAND AVENUE

City

MARINETTE

State

WI

Zip Code

54143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

PROGRAM MANAGER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

832.78

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4731

Amount of Each Receipt this Period

96.09

Contribution through payr-  
oll deduction - biweekly**C.**

Full Name (Last, First, Middle Initial)

WAYNE CONNER

Mailing Address 3400 Pierce Ave Lot 101

City

Marinette

State

WI

Zip Code

54143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORATI-  
ON

Occupation

ILS MANAGER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

579.54

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4734

Amount of Each Receipt this Period

66.87

Contribution through payr-  
oll deduction-biweekly

SUBTOTAL of Receipts This Page (optional) .....

222.96

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 18

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

MARINETTE MARINE CORPORATION PAC MMCPAC

**A.**

Full Name (Last, First, Middle Initial)

TRACY T COVEYOU

Mailing Address N7805 CEDAR LANE

City

PORTERFIELD

State

WI

Zip Code

54149

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

PRODUCTION MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4735

Amount of Each Receipt this Period

45.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. TIMOTHY J. DANHIEUX

Mailing Address 2417 21ST STREET

City

MENOMINEE

State

MI

Zip Code

49858

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

STAFF ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4736

Amount of Each Receipt this Period

62.52

Contribution through payr-  
oll deduction-biweekly**C.**

Full Name (Last, First, Middle Initial)

Ms DEBRA L. DEACON

Mailing Address N6125 CHARLEBOIS ROAD

City

HARDWOOD

State

MI

Zip Code

49807

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

MANAGER LCS PROGRAM COST CONTROL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4737

Amount of Each Receipt this Period

87.24

Contribution through payr-  
oll deduction-biweekly

SUBTOTAL of Receipts This Page (optional) .....

194.76

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MARINETTE MARINE CORPORATION PAC MMCPAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. CARLOS E. DELREAL

Mailing Address 213 WATER STREET

City

MARINETTE

State

WI

Zip Code

54143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

MANAGER MARKETING/GOV'T PROGRAMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.89

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.4738

Amount of Each Receipt this Period

59.87

Contribution through pay-  
roll deduction-biweekly

**B.**

Full Name (Last, First, Middle Initial)

Mr. TERANCE THOMAS ETNYRE

Mailing Address 19480 WING TIP ROAD

City

COLORADO SPRINGS

State

CO

Zip Code

80908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

VICE PRESIDENT GOVERNMENT PROGRAMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1233.10

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.4740

Amount of Each Receipt this Period

194.70

Contribution through pay-  
roll deduction-biweekly

**C.**

Full Name (Last, First, Middle Initial)

Mr. SCOTT T. GREENLUND

Mailing Address 409 FIRST STREET

City

MENOMINEE

State

MI

Zip Code

49858

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

191.54

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.4746

Amount of Each Receipt this Period

48.69

Contribution through pay-  
roll deduction-biweekly

**SUBTOTAL** of Receipts This Page (optional) .....

303.26

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 18

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

MARINETTE MARINE CORPORATION PAC MMCPAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. DALE r. HANSON

Mailing Address 7472 COUNTY ROAD Y

City

OCOONTO

State

WI

Zip Code

54143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

GOVERNMENT PROPERTY ADMINIS-  
TRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4749

Amount of Each Receipt this Period

33.72

Contribution through payr-  
oll deduction-biweekly**B.**

Full Name (Last, First, Middle Initial)

Mr. JEFFREY H. HOFFMAN

Mailing Address 2981 CINNAMON RIDGE TRAIL

City

GREEN BAY

State

WI

Zip Code

54313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

SUPERVISOR TRADE PLANNING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4754

Amount of Each Receipt this Period

30.00

Contribution through payr-  
oll deduction-biweekly**C.**

Full Name (Last, First, Middle Initial)

Mrs. MARC E. JAMO

Mailing Address 1701 FIRST STREET

City

MENOMINEE

State

MI

Zip Code

49858

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

CONTRACTS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4757

Amount of Each Receipt this Period

60.00

Contribution through payr-  
oll deduction-biweekly

SUBTOTAL of Receipts This Page (optional) .....

123.72

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MARINETTE MARINE CORPORATION PAC MMCPAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. JOHN E. KRUEGER

Mailing Address 1041 MARINETTE AVENUE

City

MARINETTE

State

WI

Zip Code

54143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

SUPERINTENDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.22

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.4759

Amount of Each Receipt this Period

49.88

Contribution through pay-  
roll deduction-biweekly

**B.**

Full Name (Last, First, Middle Initial)

Mr. BRUCE KUKICH

Mailing Address N1734 STQTE HWY M-35

City

MENOMINEE

State

MI

Zip Code

49858

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

DEPUTY PROGRAM MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.4760

Amount of Each Receipt this Period

90.00

Contribution through pay-  
roll deduction-biweekly

**C.**

Full Name (Last, First, Middle Initial)

JAMES T LACOSSE

Mailing Address 7 ASPEN LANE

City

GLADSTONE

State

MI

Zip Code

49837

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

PROGRAM MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.12

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.4761

Amount of Each Receipt this Period

70.86

Contribution through pay-  
roll deduction-biweekly

**SUBTOTAL** of Receipts This Page (optional) .....

210.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MARINETTE MARINE CORPORATION PAC MMCPAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. STANELY G. LAIRD

Mailing Address 2910 14TH AVENUE

City

MENOMINEE

State

MI

Zip Code

49858

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

PROGRAM MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.52

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.4762

Amount of Each Receipt this Period

58.39

Contribution through payr-  
oll deduction-biweekly

**B.**

Full Name (Last, First, Middle Initial)

Mr. DARYL L. LANAVILLE

Mailing Address N13566 CNTY RD 551

City

WILSON

State

MI

Zip Code

49896

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

MANAGER PLANNING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.4763

Amount of Each Receipt this Period

30.00

Contribution through payr-  
oll deduction-biweekly

**C.**

Full Name (Last, First, Middle Initial)

GORDON J LEPISTO

Mailing Address 4109 13TH STREET

City

MENOMINEE

State

MI

Zip Code

49858

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

DEPUTY PROGRAM MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.82

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.4764

Amount of Each Receipt this Period

67.71

Contribution through payr-  
oll deduction-biweekly

**SUBTOTAL** of Receipts This Page (optional) .....

156.10

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 18

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

MARINETTE MARINE CORPORATION PAC MMCPAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. RALPH H. MATTHEWS

Mailing Address 626 ELIZABETH AVENUE

City

MARINETTE

State

WI

Zip Code

54143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

ILS PROGRAM LEAD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4766

Amount of Each Receipt this Period

40.22

Contribution through payr-  
oll deduction-biweekly**B.**

Full Name (Last, First, Middle Initial)

RICHARD MCCREARY

Mailing Address 320 IROQUOIS AVE

City

GREEN BAY

State

WI

Zip Code

54301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4767

Amount of Each Receipt this Period

192.00

Contribution through payr-  
oll deduction-biweekly**C.**

Full Name (Last, First, Middle Initial)

ROBERT M METZGER

Mailing Address N2948 RIGHT OF WAY ROAD

City

PESHTIGO

State

WI

Zip Code

54157

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

DIRECTOR OF PRODUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4769

Amount of Each Receipt this Period

60.00

Contribution through payr-  
oll deduction-biweekly

SUBTOTAL of Receipts This Page (optional) .....

292.22

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MARINETTE MARINE CORPORATION PAC MMCPAC

**A.**

Full Name (Last, First, Middle Initial)

LORI OKRASINSKI

Mailing Address N6298 BRAMBLE LANE

City

PORTERFIELD

State

WI

Zip Code

54159

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

PURCHASING MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.4773

Amount of Each Receipt this Period

60.00

Contribution through pay-  
roll deduction-biweekly

**B.**

Full Name (Last, First, Middle Initial)

Mr. ALLAN POMEROY

Mailing Address N4631 PINWOODS LOOP ROAD 11

City

WALLACE

State

MI

Zip Code

49893

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

SENIOR BUYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.32

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.4776

Amount of Each Receipt this Period

40.85

Contribution through pay-  
roll deduction-biweekly

**C.**

Full Name (Last, First, Middle Initial)

DUANE R ROEHM

Mailing Address 4115 15TH STREET

City

MENOMINEE

State

MI

Zip Code

49858

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

VICE PRESIDENT PROGRAMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.4779

Amount of Each Receipt this Period

60.00

Contribution through pay-  
roll deduction-biweekly

**SUBTOTAL** of Receipts This Page (optional) .....

160.85

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 18

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

MARINETTE MARINE CORPORATION PAC MMCPAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. DANIEL J ROLAND

Mailing Address N5649 HWY 180

City

MARINETTE

State

WI

Zip Code

54143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

QUALITY TECHNICAL COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4780

Amount of Each Receipt this Period

60.06

Contribution through pay-  
roll deduction-biweekly**B.**

Full Name (Last, First, Middle Initial)

Mr. RONALD SENDZIK

Mailing Address P.O. BOX 66

City

IRON MOUNTAIN

State

MI

Zip Code

49801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

ASSISTANT MANAGER ILS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4784

Amount of Each Receipt this Period

38.92

Contribution through pay-  
roll deduction-biweekly**C.**

Full Name (Last, First, Middle Initial)

JUSTIN W SLATER

Mailing Address W2520 PETERSON ROAD

City

MARINETTE

State

WI

Zip Code

54143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

PROJECT ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

627.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4785

Amount of Each Receipt this Period

72.36

Contribution through pay-  
roll deduction-biweekly

SUBTOTAL of Receipts This Page (optional) .....

171.34

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MARINETTE MARINE CORPORATION PAC MMCPAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. CLEMENT I. SMALLS

Mailing Address 1521 CARNEY BLVD

City

MARINETTE

State

WV

Zip Code

54143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

DESIGNER II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.4786

Amount of Each Receipt this Period

60.00

Contribution through payr-  
oll deduction-weekly

**B.**

Full Name (Last, First, Middle Initial)

Mrs. ROSE M SMITH

Mailing Address W6068 #2 ROAD

City

MENOMINEE

State

MI

Zip Code

49858

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.4787

Amount of Each Receipt this Period

30.00

Contribution through payr-  
oll deduction-weekly

**C.**

Full Name (Last, First, Middle Initial)

Mr. MARK H. SPICKNALL

Mailing Address 2117 KINGFISHER LN

City

GREEN BAY

State

WI

Zip Code

54313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

DIRECTOR PRODUCTION CONTROL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.4788

Amount of Each Receipt this Period

60.00

Contribution through payr-  
oll deduction-biweekly

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 18

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

MARINETTE MARINE CORPORATION PAC MMCPAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. ROBERT STEVENS

Mailing Address 535 MAIN STREET

City

MARINETTE

State

WI

Zip Code

54143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

SUPERINTENDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4789

Amount of Each Receipt this Period

30.00

Contribution through pay-  
roll deduction-biweekly**B.**

Full Name (Last, First, Middle Initial)

Mr. ROBERT A. SUNDERLAGE

Mailing Address 2893 HARBOR WINDS DRIVE

City

SUAMICO

State

WI

Zip Code

54173

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

SR ERP BUSINESS SYSTEM ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4791

Amount of Each Receipt this Period

30.00

Contribution through pay-  
roll deduction-biweekly**C.**

Full Name (Last, First, Middle Initial)

ROBERT VLIES

Mailing Address 515 FLORA AVENUE

City

ALGOMA

State

WI

Zip Code

54201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

STRUCTURAL ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4792

Amount of Each Receipt this Period

34.62

Contribution through pay-  
roll deduction-biweekly

SUBTOTAL of Receipts This Page (optional) .....

94.62

TOTAL This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 18

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

MARINETTE MARINE CORPORATION PAC MMCPAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. MICHAEL WALTZ

Mailing Address 2340 SHORE DRIVE

City

MARINETTE

State

WI

Zip Code

54143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

PLANNING COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4793

Amount of Each Receipt this Period

30.00

Contribution through payr-  
oll deduction-biweekly**B.**

Full Name (Last, First, Middle Initial)

Mr. SCOTT A. WELLENS

Mailing Address N916 HWY M35

City

MENOMINEE

State

MI

Zip Code

49858

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

PROCESS IMPROVEMENT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4794

Amount of Each Receipt this Period

30.00

Contribution through payr-  
oll deduction-biweekly**C.**

Full Name (Last, First, Middle Initial)

Mr. PETER W. WERGEDAL

Mailing Address N3081 SEWARD HEIGHTS ROAD

City

PESHTIGO

State

WI

Zip Code

54147

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAI-  
TON

Occupation

SUPERINTENDENT BLD 10

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4796

Amount of Each Receipt this Period

30.00

Contribution through payr-  
oll deduction-biweekly

SUBTOTAL of Receipts This Page (optional) .....

90.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 18

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

MARINETTE MARINE CORPORATION PAC MMCPAC

**A.**

Full Name (Last, First, Middle Initial)

Mr. JAMES G. WILSON

Mailing Address W6345 CTY HWY G

City

CRIVITZ

State

WI

Zip Code

54114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINETTE MARINE CORPORAT-  
ION

Occupation

MANAGER ESTIMATING

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: SA11AI.4798

Amount of Each Receipt this Period

30.00

Contribution through pay-  
roll deduction-biweekly

SUBTOTAL of Receipts This Page (optional) .....

30.00

TOTAL This Period (last page this line number only) .....

2200.57